SENDER: COMPLETE THIS SECTION DOCL	COMPLETE THIS SECTION OF BELIVERY Page 1 of
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature X
Masterbrand Cabinets, Inc. c/o CSC Lawyers Incorporating Svc. Inc. Agent for Process of Service 150 S. Perry Street Montgomery, AL 36104	3. Service Type Certified Mail D. Express Mall
	Registered Return Receipt for Merchandise C.O.D.
2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540